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ABSTRACT

Provided by the American Foundation for the Blind are a background history and a policy statement on the early childhood education of blind or severely visually impaired children. Briefly reviewed is the prior trend of institutionalization for children with severe visual handicaps, subsequent development of organizations such as the Children's Bureau which have provided parents with social and educational services, and current trends which emphasize the importance of total development in early childhood. Described in the AFB policy statement is the necessity for early stimulation and learning opportunities; early detection of the degree of impairment; a home environment that involves parental education, counseling, and use of specific stimulation techniques; evaluations by qualified professionals on a team basis; a variety of programs to serve specific visual handicaps; and coordinated community services. (MC)

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Policy Statement

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BACKGROUND

When parents learn that their infant or young child is blind or has a severe visual impairment, they react with a variety of emotional responses. They may be disappointed and overwhelmed with grief; they may develop feelings of guilt; they may be afraid of what the future holds for them and for their infant; strong cultural stereotypes of blindness may cause them to openly reject their infant even to the point of physical neglect. On first learning that their child is blind, almost all parents are immobilized and feel incapable of carrying out their normal parental responsibilities.

During the 19th century, parents were thought to be unable to accept responsibility in such situations. The number of children blind as infants, or in their early years, was not great. A child with such a severe handicap was usually cared for in a residential institution or else left at home for parents to cope as best they could until he could be sent to an institution.

This philosophy remained fairly static until the early part of the 20th century when a dramatic increase in the number of blind infants and parental demands for services stimulated professional persons to direct additional attention and efforts toward providing help for parents of young blind children.

In the intervening years, more extensive health, social, and educational services to all children have either expanded or been initiated. For example, the Children's Bureau was established with the primary objective of making medical and social services available to children with special needs and to their parents. Attention was also focused on educational services in the nursery school and kindergarten movement. Currently, these are being expanded through such programs as child care centers, and early childhood and parent education programs. Increasingly, services to pre-school children and their parents are viewed as a right for all in our democratic society.

Programs and services to maximize the total development of any young child must not exclude a child because of a handicap. Expansion of services to handicapped children, including those who are blind, may take many forms depending on the sponsoring agencies. All should aim, however, at enhancing the early growth and optimum development of the blind child and direct

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attention toward teaching the child those skills that will enable him to make maximum use of an education program.

The current thrust in recognizing the necessity of parent and early childhood education has evolved from the interest of the behavioral sciences in the development of the human being, beginning with the prenatal period. Adequate prenatal care is recognized as being essential, and must be provided to all regardless of income, if the infant is to begin life with the capacity for realizing his future potential. Beginning at birth, every minute of the child's life should be considered a learning experience. Scientific investigation has demonstrated that factors in his immediate environment as well as his inherent characteristics will influence developmental growth and learning. Therefore, programs must be aimed at enhancing the child's early learning through optimal physical remediation services, through parent involvement at all stages, and through provision of early educational programs that will stimulate motor, cognitive, and affective development.

POLICY

The American Foundation for the Blind recognizes that the early years are a critical period in the lifespan of any individual and that optimum opportunities for total development -- intellectual, social, physical, and emotional -- must be provided to the blind or severely visually impaired child beginning with infancy. Early childhood education that provides experiences fundamental to intellectual growth is significant in its own right and should not necessarily be regarded as a "readiness" step for the future.

For the blind or severely visually impaired child, early childhood education involves providing stimulation and opportunities for learning and enriching social environment with comprehensive supplementary services available to the child and to his parents as they may be needed. Early detection of visual impairment, accurate diagnosis, and continuing medical follow-up are imperative to good eye health and to the preservation of whatever residual vision may be present. Accurate knowledge of a child's condition is also important to an understanding and assessment of his capacity for eventual visual functioning.

A home environment is generally most conducive to the optimum growth and development and early education of the young child. Most parents of blind children can use supportive assistance in coping with their feelings of helplessness and such assistance should be available to the child and his family as early as possible after the diagnosis of the visual impairment. Parents should have available to them a continuum of counseling services that will enable them to cope with their own feelings and to help them develop a warm, accepting relationship with their child.

Because a severe visual impairment does alter a child's learning and functioning, particularly in the cognitive areas, assistance to the parents must be of an instructional nature, with interpretation of necessary adaptations because of a child's visual loss. Parents should be helped to know the most efficient techniques of helping children make effective use of their residual vision and to maximize the use of other channels of sensory input. When a child has more than one sensory impairment, the need for knowledge of specific techniques is even greater for both the parent-educator and the parent, especially in providing adequate sensory stimulation.

Services to parents and child should be offered by qualified persons who have professional knowledge of early child development, an understanding of inter-personal relationships, and training and skill in counseling. Previous experience in services with physically normal children and parents is a desirable background for those who work with parents of blind children.

A variety of programs should be available so that the one selected is the most appropriate to meet the needs of the blind child at a particular point in his development. Participation in group activities with seeing children enriches the learning experience for the child who is blind. Some blind children, however, may benefit from educational programs geared to their special needs. Special nursery school programs may be particularly necessary for the blind child with other handicaps.

The evaluation of the young blind child should be on-going and the result of the coordinated efforts of professional persons from various disciplines who are familiar with the child's performance and with the family and community constellation within which the child is functioning.

The provision of services will be most effective if the total plan for such services is also coordinated. The blind child and his parents may well require a multiplicity of services over a period of years. An appropriate agency (such as a state agency) providing or procuring programs of early identification and long-term coordination of medical, social, and educational services would prevent needless duplication and fragmentation of services and the concomitant painful experience for both parents and child.

Since many children with visual impairments today have more than one handicapping condition, it is important that the early childhood educational programs make provision for maximizing the child's ability and utilizing those community resources that are most appropriate for enhancing the child's total development.

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